

Freed-Hardeman University

Privacy Release Form

In compliance with the federal Family Educational Rights and Privacy Act of 1974, Freed-Hardeman University will not release non-directory information about you without your consent. Therefore, before we can discuss your bill, financial aid, academic progress, or grades with anyone else, including members of your immediate family, we must obtain your permission. Please complete this form to indicate who we are authorized to communicate with regarding your records.

I. Student Information

Last Name First Name M.I. Student ID #

Address City State Zip

Phone Email Birthdate

II. Third-Party Information- Who can/should we release your information to? We will only release your information if a listed relation contacts us through the phone/email that you provide.

Name Relation Phone and/or Email

Name Relation Phone and/or Email

Name Relation Phone and/or Email

Name Relation Phone and/or Email

III. Types of Information- Please check the type(s) of information that you release us to discuss.

- Academic Information-** Grades/GPA, Registration, Academic Progress, Tutoring, Honors, Suspensions/ Probations, etc.

- Financial Information-** Billing statements, Charges, Credits, Payments, Past Due Amounts, Financial Eligibility, Disbursements, etc.

To the extent authorized by this release, I hereby waive my rights under the Federal Education Rights and Privacy Act (FERPA), 20 U.S. Code 1232g. I understand that this authorization covers my entire academic career at Freed-Hardeman University. I understand that I may submit another authorization if I wish to replace or change any of the information provided above. Rescission of this authorization must be in writing, is valid as of the date received, and is not retroactive.

Student Signature Date